

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Baxter Healthcare Political Action Committee

ADDRESS (number and street)

1501 K Street, NW

Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00117838

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sarah Creviston

Signature of Treasurer

Electronically Filed by Sarah Creviston

Date

04

09

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Baxter Healthcare Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		55170.29
(b) Cash on Hand at Beginning of Reporting Period	55448.99	
(c) Total Receipts (from Line 19)	13438.28	35716.98
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	68887.27	90887.27
7. Total Disbursements (from Line 31)	27000.00	49000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41887.27	41887.27
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12134.34	23900.48
(i) Itemized (use Schedule A)		
(ii) Unitemized	1303.94	11816.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	13438.28	35716.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	13438.28	35716.98
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	13438.28	35716.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13438.28	35716.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27000.00	45000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	4000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	27000.00	49000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27000.00	49000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	13438.28	35716.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13438.28	35716.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Joy A Amundson

Mailing Address 110 W. Onwentsia Road

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, Pres BioScience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33548

Amount of Each Receipt this Period

430.76

Receipt

Payroll Deduction: (215.3-
8/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Peter J Arduini

Mailing Address 1059 Warrington Road

City State Zip Code
 Deerfield IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
CVP, Pres Medication Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33549

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Robert H Armstrong

Mailing Address 133 Manchester Drive

City State Zip Code
 Waukesha WI 53188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP, R & D Medical Devices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33552

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

730.76

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Donald Baker

Mailing Address 286 Whitworth

City

Thousand Oaks

State

CA

Zip Code

91360

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: 80403.C33585

Amount of Each Receipt this Period

127.22

Receipt

Payroll Deduction: (63.61-
/Pay Period)**B.**

Full Name (Last, First, Middle Initial)

Michael J Baughman

Mailing Address 5343 N Lakewood Avenue

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: 80403.C33592

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)**C.**

Full Name (Last, First, Middle Initial)

Edwin Betancourt-morales

Mailing Address 101 N E 3rd Avenue, Ste 1600

City

Ft Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Export Corporation

Occupation

VP I, Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: 80403.C33612

Amount of Each Receipt this Period

82.00

Receipt

Payroll Deduction: (41.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

409.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Susan Brown

Mailing Address 7707 Wisconsin Ave #412

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Plant Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33527

Amount of Each Receipt this Period

106.16

Receipt

Payroll Deduction: (53.08-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Sebastian Bufalino

Mailing Address 1091 Pine Meadow Ct

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

VP, Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33606

Amount of Each Receipt this Period

96.64

Receipt

Payroll Deduction: (48.32-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Edward Conrad

Mailing Address 113 S Waverly Pl

City

Mt Prospect

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

Dir, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33589

Amount of Each Receipt this Period

122.40

Receipt

Payroll Deduction: (61.20-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

325.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Sarah Creviston

Mailing Address 717 North Maple Ave.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP, Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33581

Amount of Each Receipt this Period

187.86

Receipt

Payroll Deduction: (93.93-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Margarita Cruz-casse

Mailing Address Violeta 153, San Francisco

City

San Juan

State

PR

Zip Code

00927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
Rico

Occupation

Dir, Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.58

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33615

Amount of Each Receipt this Period

90.86

Receipt

Payroll Deduction: (45.43-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Robert M Davis

Mailing Address 21515 Hummingbird Court

City

Kildeer

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33593

Amount of Each Receipt this Period

323.08

Receipt

Payroll Deduction: (161.5-
4/Pay Period)

SUBTOTAL of Receipts This Page (optional)

601.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Scot Deaths

Mailing Address 28461 Hidden Hills Blvd

City

Saugus

State

CA

Zip Code

91390

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Plant Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33566

Amount of Each Receipt this Period

67.78

Receipt

Payroll Deduction: (33.89-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Paul Estrem

Mailing Address 325 Clarewood Circle

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33546

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Camille I Farhat

Mailing Address 1052 Warrington Road

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

General Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33554

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

267.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Valery E Gallagher

Mailing Address 14334 Spring Meadow Court

City

Green Oaks

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, State Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33556

Amount of Each Receipt this Period

127.20

Receipt

Payroll Deduction: (63.60-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

James Gatling

Mailing Address 3704 Lindsay Ln

City

Crystal Lake

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

CVP, Global Manufacturing Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

887.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33525

Amount of Each Receipt this Period

303.08

Receipt

Payroll Deduction: (151.5-
4/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Arthur J Gibson

Mailing Address 3775 Riverly Trace

City

Marietta

State

GA

Zip Code

30067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP, Environ Health & Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33553

Amount of Each Receipt this Period

96.92

Receipt

Payroll Deduction: (48.46-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

527.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John Greisch

Mailing Address 2636 Chesapeake Lane

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, President - International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.46

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33608

Amount of Each Receipt this Period

474.62

Receipt

Payroll Deduction: (237.3-
1/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Lawrence Guiheen

Mailing Address 1653 Vista Oaks Way

City

Westlake Village

State

CA

Zip Code

91361

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

President V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33516

Amount of Each Receipt this Period

70.00

Receipt

Payroll Deduction: (35.00-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Andrew C Hayes

Mailing Address 1620 Timber Woods Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Sr Dir, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.94

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33558

Amount of Each Receipt this Period

117.98

Receipt

Payroll Deduction: (58.99-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

662.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Worth Holder Jr

Mailing Address 42 Jamestown Court

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

VP II, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33603

Amount of Each Receipt this Period

88.90

Receipt

Payroll Deduction: (44.45-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Irene Jakimcius

Mailing Address 2208 Wesley Ave.

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

Assoc General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33597

Amount of Each Receipt this Period

150.54

Receipt

Payroll Deduction: (75.27-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Sohini Gupta Jindal

Mailing Address 19513 Mill Dam Place

City

Lansdowne

State

VA

Zip Code

20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, Fed Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.48

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33569

Amount of Each Receipt this Period

71.16

Receipt

Payroll Deduction: (35.58-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

310.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James Kamienski

Mailing Address 6312 N Keating

City

Chicago

State

IL

Zip Code

60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33526

Amount of Each Receipt this Period

104.96

Receipt

Payroll Deduction: (52.48-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Robert Keeley

Mailing Address 22606 Bridle

City

Kildeer

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.32

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33570

Amount of Each Receipt this Period

94.44

Receipt

Payroll Deduction: (47.22-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Jane Kiernan

Mailing Address 525 W. Roscoe, #3W

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

General Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2660.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: 80409.C33722

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2699.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jane Kiernan

Mailing Address 525 W. Roscoe, #3W

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

General Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2740.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33540

Amount of Each Receipt this Period

80.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Marie G Kissel

Mailing Address 1 Baxter Pkwy c/o Gerald Lema

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter World Trade Corpora-
tion

Occupation

Dir, Fed Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.16

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33609

Amount of Each Receipt this Period

143.72

Receipt

Payroll Deduction: (71.86-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Edward A Langan

Mailing Address 2001 Tower Drive #339

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33514

Amount of Each Receipt this Period

150.00

Receipt

Payroll Deduction: (75.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

373.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Susan R Lichtenstein

Mailing Address 1257 W Wrightwood Ave

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1191.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33594

Amount of Each Receipt this Period

406.92

Receipt

Payroll Deduction: (203.4-
6/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Raymond Linder Jr

Mailing Address 246 Montclair Road

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33545

Amount of Each Receipt this Period

74.62

Receipt

Payroll Deduction: (37.31-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Ronald K Lloyd

Mailing Address 1694 Falling Star Ave.

City

Westlake Village

State

CA

Zip Code

91362

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

General Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33544

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

581.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Matthew Lykken

Mailing Address 421 North Wheaton Ave

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
VP, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33605

Amount of Each Receipt this Period

115.38

Receipt

Payroll Deduction: (57.69-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Brian W Magerkurth

Mailing Address 500 Deerfield Road

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP II, Global Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33550

Amount of Each Receipt this Period

114.96

Receipt

Payroll Deduction: (57.48-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Michael Martin

Mailing Address 546 Lochwood Dr

City

Crystal Lake

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP I, Mfg Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33531

Amount of Each Receipt this Period

145.66

Receipt

Payroll Deduction: (72.83-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

376.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Teresita Martinez-santini

Mailing Address A-1 Atenas St Repto Flamingo

City

Bayamon

State

PR

Zip Code

00959

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Puerto
Rico

Occupation

Dir, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33614

Amount of Each Receipt this Period

91.54

Receipt

Payroll Deduction: (45.77-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Jeanne K Mason

Mailing Address 1760 Duffy Lane

City

Bannockburn

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33600

Amount of Each Receipt this Period

331.54

Receipt

Payroll Deduction: (165.7-
7/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Michael J McAndrew

Mailing Address 795 Foxmoor

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, R & D Project Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33565

Amount of Each Receipt this Period

67.92

Receipt

Payroll Deduction: (33.96-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

491.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kevin Mcculloch

Mailing Address 730 Greenwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP, Transition Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33576

Amount of Each Receipt this Period

119.62

Receipt

Payroll Deduction: (59.81-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Bruce McGillivray

Mailing Address 151 Ridge Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

CVP, President Renal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33571

Amount of Each Receipt this Period

319.24

Receipt

Payroll Deduction: (159.6-
2/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Frank Monteleone

Mailing Address 4620 Forest Edge Lane

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33578

Amount of Each Receipt this Period

92.30

Receipt

Payroll Deduction: (46.15-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

531.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Peter Omalley

Mailing Address 791 Summit Avenue

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
VP/GM II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33584

Amount of Each Receipt this Period

90.00

Receipt

Payroll Deduction: (45.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Robert L Parkinson

Mailing Address 1332 Edgewood Lane

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation
Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3044.62

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33604

Amount of Each Receipt this Period

1032.30

Receipt

Payroll Deduction: (516.1-
5/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Carla Pittman

Mailing Address 5720 Shenandoah Avenue

City

Los Angeles

State

CA

Zip Code

90056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation
Sr Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33572

Amount of Each Receipt this Period

106.62

Receipt

Payroll Deduction: (53.31-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

1228.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Janet L Raciti

Mailing Address 19 Wimbledon Court

City

Lincolnshire

State

IL

Zip Code

60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33538

Amount of Each Receipt this Period

80.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

David H Resnicoff

Mailing Address 926 Valley Road

City

Glencoe

State

IL

Zip Code

60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

Assoc General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33601

Amount of Each Receipt this Period

105.34

Receipt

Payroll Deduction: (52.67-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Roibin Ryan

Mailing Address 1419 W Berteau

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.82

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33598

Amount of Each Receipt this Period

182.94

Receipt

Payroll Deduction: (91.47-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

368.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James K Saccaro

Mailing Address Baxter Expat Admin PO Box 747

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter World Trade Corpor-
ation

Occupation

VP II, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33611

Amount of Each Receipt this Period

99.88

Receipt

Payroll Deduction: (49.94-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

David P Scharf

Mailing Address 931 Oak Street

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.06

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33595

Amount of Each Receipt this Period

115.38

Receipt

Payroll Deduction: (57.69-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Chandra Sekhar

Mailing Address 1621 Mission Hills Rd Unit 211

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Mfg Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33515

Amount of Each Receipt this Period

106.64

Receipt

Payroll Deduction: (53.32-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

321.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John P Shannon

Mailing Address 432 Utley

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP II, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33583

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Donald Sullivan

Mailing Address 910 W Cypress Drive

City

Arlington Heights

State

IL

Zip Code

60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

VP, Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33587

Amount of Each Receipt this Period

80.00

Receipt

Payroll Deduction: (40.00-
/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Karenann Terrell

Mailing Address 914 Queens Lanes

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter International Inc.

Occupation

CVP, Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.86

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33599

Amount of Each Receipt this Period

384.62

Receipt

Payroll Deduction: (192.3-
1/Pay Period)

SUBTOTAL of Receipts This Page (optional)

564.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Onelia Vera-littrell

Mailing Address 619 Oleander Drive

City

Hallandale

State

FL

Zip Code

33009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Asst General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33580

Amount of Each Receipt this Period

187.64

Receipt

Payroll Deduction: (93.82-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Cheryl White

Mailing Address 4069 Mayfield Street

City

Newbury Park

State

CA

Zip Code

91320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

CVP, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

826.94

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33586

Amount of Each Receipt this Period

288.46

Receipt

Payroll Deduction: (144.2-
3/Pay Period)

C.

Full Name (Last, First, Middle Initial)

Deborah K Williams

Mailing Address 3805 Fenchurch Rd

City

Baltimore

State

MD

Zip Code

21218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

Dir, Fed Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33560

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

576.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Vernon Williams

Mailing Address 1601 Wyndham Court

City

Santa Ana

State

CA

Zip Code

92705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter Healthcare Corpora-
tion

Occupation

VP, Baxter IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33574

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

B.

Full Name (Last, First, Middle Initial)

Subramania Yogendran

Mailing Address Baxter Expat Admin PO Box 747

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baxter World Trade Corpora-
tion

Occupation

VP II, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.62

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80403.C33610

Amount of Each Receipt this Period

86.54

Receipt

Payroll Deduction: (43.27-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

186.54

TOTAL This Period (last page this line number only)

12134.34

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Berry for Congress

Mailing Address 615 S Main St

City
Jonesboro

State
AR

Zip Code
72401-2862

Purpose of Disbursement

Candidate Name
MARION BERRY

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 01

Transaction ID: 80403.E870

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

The Freedom Project

Mailing Address 104 Hume Ave

City
Alexandria

State
VA

Zip Code
22301-1015

Purpose of Disbursement
CALENDAR YEAR 2008 CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80403.E867

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

CALENDAR YEAR 2008 CONTRI-
BUTION

C.

Full Name (Last, First, Middle Initial)

The Richard Burr Committee

Mailing Address PO Box 5928

City
Winston Salem

State
NC

Zip Code
27113-

Purpose of Disbursement

Candidate Name
RICHARD M BURR

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 00

Transaction ID: 80403.E868

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Dave Camp for Congress

Mailing Address PO Box 423

City
Midland

State
MI

Zip Code
48640-

Purpose of Disbursement

Candidate Name
DAVID LEE CAMP

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: 80403.E873

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Dave Camp for Congress

Mailing Address PO Box 423

City
Midland

State
MI

Zip Code
48640-

Purpose of Disbursement

Candidate Name
DAVID LEE CAMP

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: 80403.E872

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Collins for Senate

Mailing Address PO Box 1096

City
Bangor

State
ME

Zip Code
04402-1096

Purpose of Disbursement

Candidate Name
SUSAN M COLLINS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: 80409.E877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Diana DeGette for Congress

Mailing Address PO Box 61337

City
Denver

State
CO

Zip Code
80206-

Purpose of Disbursement

Candidate Name
DIANA L DEGETTE

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 01

Transaction ID: 80403.E876

Date of Disbursement

03 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kind for Congress

Mailing Address 38 Ivy St

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement

Candidate Name
RON KIND

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Transaction ID: 80403.E871

Date of Disbursement

03 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

New Democrat Coalition PAC

Mailing Address 607 14th Street NW
Suite 800

City
Washington

State
DC

Zip Code
20005-

Purpose of Disbursement
2008 CALENDAR YEAR CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80403.E875

Date of Disbursement

03 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

2008 CALENDAR YEAR CONTRI-
BUTION

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
National Republican Senatorial Committee

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
2008 CALENDAR YEAR CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80403.E874

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

2008 CALENDAR YEAR CONTRI-
BUTION

B. Full Name (Last, First, Middle Initial)
Roberts for Senate

Mailing Address PO Box 433

City Great Bend State KS Zip Code 67530-

Purpose of Disbursement

Candidate Name
PAT ROBERTS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: 80403.E866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Ryan for Congress

Mailing Address PO Box 1919

City Janesville State WI Zip Code 53547-1919

Purpose of Disbursement

Candidate Name
PAUL D RYAN

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 01

Transaction ID: 80409.E878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Adam Schiff for Congress

Mailing Address 35 S Raymond Ave

City
Pasadena

State
CA

Zip Code
91105-3701

Purpose of Disbursement

Candidate Name
ADAM SCHIFF

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 29

Transaction ID: 80403.E869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

27000.00